



NEWS RELEASE

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FOR IMMEDIATE RELEASE

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AOA Joins House Rural Health Care Coalition in Support of Rural Physicians

(Washington, DC) – The American Osteopathic Association (AOA) joined Reps. Greg Walden (R-OR) and Earl Pomeroy (D-ND) and other members of the House Rural Health Care Coalition today in introducing the “Medicare Rural Health Provider Payment Extension Act of 2006” (H.R. 5118).

“On behalf of the 56,000 osteopathic physicians represented by the AOA, I would like to extend our appreciation to Congressmen Walden and Pomeroy for introducing this important legislation,” stated AOA Executive Director John B. Crosby, JD. “Their leadership on rural health issues is commendable. I also want to thank the members of the House Rural Health Care Coalition and the House Rural Caucus for their early support of this legislation and for their continued efforts to improve the health care delivery system in rural communities.”

The AOA is especially supportive of provisions in the legislation that would ensure that the work of all physicians, regardless of the geographic location of their practice, is compensated in an equitable manner. The AOA has long-standing policy that the “work” of a physician be reimbursed in an equitable manner regardless of the geographic location of their practice.

By extending several payment provisions set to expire later this year and in 2007, H.R. 5118 aims to preserve Medicare beneficiaries access to physicians, hospitals, laboratory, and ambulance services. Each of the provisions included in this bill are essential to ensuring that rural communities have stable and functioning health care systems.

“The AOA is committed to seeing the enactment of this legislation prior to the end of the 109th Congress,” stated Crosby. “H.R. 5118, deserves consideration by the House of Representatives as soon as possible.”

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The American Osteopathic Association proudly represents over 56,000 osteopathic physicians (D.O.s) practicing in 31 specialties and subspecialties, promotes public health, encourages scientific research, serves as the primary certifying body for D.O.s and is the accrediting agency for all osteopathic medical schools and health care facilities. More information on D.O.s/osteopathic medicine can be found at www.osteopathic.org.



AMERICAN OSTEOPATHIC ASSOCIATION

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Statement of John B. Crosby, JD
Executive Director American Osteopathic Association

Medicare Rural Health Provider Payment Extension Act of 2006 (H.R. 5118)

Good morning. My name is John Crosby and I am the Executive Director of the American Osteopathic Association. The AOA proudly represents the nation's 56,000 osteopathic physicians and approximately 10,000 osteopathic medical students.

On behalf of our members, I would like to extend our appreciation to Congressmen Walden and Pomeroy for introducing this important legislation. Their leadership on rural health issues is commendable. I also want to thank the members of the House Rural Health Care Coalition and the House Rural Caucus for their early support of this legislation and for their continued efforts to improve the health care delivery system in rural communities.

The AOA was proud to be an early supporter of this legislation. We believe that the provisions included in H.R. 5118 are important and deserve consideration by the House of Representatives. We are especially supportive of provisions in your bill that would ensure that the work of all physicians, regardless of the geographic location of their practice, is compensated in an equitable manner. The "work" of a physician does not vary based upon the geographic location of their practice. This is a sound policy provision and we thank you for including it in your bill.

By extending several payment provisions set to expire later this year and in 2007, this legislation aims to preserve Medicare beneficiaries access to physicians, hospitals, laboratory, and ambulance services. Each of the provisions included in this bill are essential to ensuring that rural communities have a stable and functioning health care system.

In closing, I want to ensure you that the AOA is committed to seeing the enactment of this legislation prior to the end of the 109th Congress.

Thank you.



AMERICAN OSTEOPATHIC ASSOCIATION

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March 21, 2006

The Honorable Greg Walden
U.S. House of Representatives
1210 Longworth House Office Building
Washington, DC 20515

The Honorable Earl Pomeroy
U.S. House of Representatives
1501 Longworth House Office Building
Washington, DC 20515

Dear Congressmen Walden and Pomeroy:

As President of the American Osteopathic Association (AOA), I write to express our strong support for the "Medicare Rural Health Providers Payment Extension Act." The AOA, which represents the nation's 56,000 osteopathic physicians, applauds your leadership and the leadership of the House Rural Health Care Coalition (RHCC) on these issues. Your continued commitment to improving health care in rural communities is commendable.

The AOA actively advocated for the inclusion of rural physician payment provisions as part of the Medicare Modernization Act. We were pleased that the final legislation included a provision that provided equity in how the Medicare program views and evaluates the work of physicians regardless of geographic location. By establishing a 1.0 floor for the work geographic practice cost indices (GPCI) under the Medicare physician fee schedule, the MMA reversed years of inequities in payments between rural physicians and those in larger urban communities. We were equally pleased that the MMA included a 5 percent add-on payment for physicians practicing in recognized Medicare physician scarcity areas.

As you know, both of these provisions will soon expire. We believe that they are essential and positive Medicare payment policies that should be extended, if not made permanent. We appreciate your inclusion of provisions in your legislation that would extend both of these policies through 2011. Additionally, we appreciate the inclusion of provisions that would extend payment policies for services provided by rural hospitals and ambulance services provided in rural areas. Both of these provisions will enhance beneficiary access and improve the quality of care available.

Again, thank you for your leadership on these issues. The AOA and our members stand ready to assist you and the RHCC in securing enactment of these important provisions.

Sincerely,

Philip Shettle, D.O.
President